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Conclusions: We replicated previous findings of significantly higher PRS for bipolar disorder and schizophrenia in postpartum psychosis compared with healthy controls. In contrast to previous research, we find postpartum psychosis cases to have higher PRS for bipolar disorder than bipolar disorder cases. Our findings highlight the genetic influence in postpartum psychosis and support previous genetic and epidemiological evidence that postpartum psychosis lies on the bipolar spectrum.

Disclosure of Interest: None Declared

Child and Adolescent Psychiatry 06

EPP0795

Management of risperidone-induced hyperprolactinemia in children: a case report

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Introduction: Antipsychotics have shown their interest in several pathologies of children and adolescents. However, in this vulnerable population, they are not exempt from adverse effects. Hyperprolactinemia is a frequent and underestimated consequence of treatment with these drugs.

Risperidone has a marked tendency to elevate prolactin and induce the impact of hyperprolactinemia, comparable to haloperidol, and higher than most atypical antipsychotics. Reported prevalences range from 43.2% to over 64% [4].

Aripiprazole is more neutral, even decreasing prolactin levels. Several studies have affirmed this nature, hence its usefulness and effectiveness in the management of antipsychotic-induced hyperprolactinemia.

Objectives: To highlight the importance of monitoring prolactinemia in children on antipsychotic drugs. evoke the different therapeutic alternatives for the management of this adverse effect. show the effectiveness of aripiprazole in the management of antipsychotic-induced hyperprolactinemia.

Methods: We report the case of a 14-year-old girl, followed since the age of 5 for an intellectual development disorder, who was put on risperidone to manage her aggressiveness and insomnia. the appearance of mild hirsutism (Ferriman and Gallwey score = 15) with amenorrhea for 3 months. Thus, we decreased the dose of risperidone to 1 mg/d and requested a prolactinemia, which came back very high at 1637 mUI/l (N=63.6 - 305.28). The diagnosis of antipsychotic-induced hyperprolactinemia was retained after elimination of a prolactinoma and the patient was put on aripiprazole according to the modalities of the antipsychotic switch. We report the case of a 14-year-old girl, followed since the age of 5 for an intellectual development disorder, who was put on risperidone to manage her aggressiveness and insomnia.the appearance of mild hirsutism (Ferriman and Gallwey score = 15) with amenorrhea for 3 months. Thus, we decreased the dose of risperidone to 1 mg/d and requested a prolactinemia, which came back very high at 1637 mUI/l (N=63.6 - 305.28). The diagnosis of antipsychotic-induced

hyperprolactinemia was retained after elimination of a prolactinoma and the patient was put on aripiprazole according to the modalities of the antipsychotic switch.

Results: We observed a rapid decrease in serum prolactin as soon as 10 mg of aripiprazole was reached with a change from 1276 to 461 mIU/l after one month before its normalization the following month (237 mIU/l).

Conclusions: The prescriber must therefore make a choice that is adjusted to the patient's pathology, but also to the slightest sign of adverse effects. He will have to re-evaluate regularly the efficacy of the treatment and confront it with the possible adverse effects of the patient.

Disclosure of Interest: None Declared

EPP0796

Tyrosinemia type 1 and ADHD like symptoms similarity or comorbidity about a case

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Introduction: Many metabolic diseases influence brain function and are associated with psychiatric symptoms and neuropsychiatric disorders (including autism-spectrum disorders, ADHD and psychotic disorders). Attention-deficit-/hyperactivity disorder (ADHD) is among the most common neurodevelopmental disorders in children, with a worldwide prevalence of about 5% in childhood. Tyrosinemia is caused by a genetic mutation in the fumarylacetoacetase gene that leads to a deficiency in the encoded enzyme, which catalyzes the cleavage of tyrosine metabolites to acetoacetic acid and fumaric acid. In recent studies of children with tyrosinemia type 1, a strong correlation was observed between symptoms of ADHD and blood levels of tyrosine, supporting a direct role of this amino acid in the pathogenesis.

Objectives: we report this case of tyrosinemia type 1 associated to ADHD symptoms to contribute in literature to provide more insights into possible shared pathophysiological mechanisms and how these affect their treatment.

Methods: We report the case of an 8-year-old child, followed since the age of 3 months for a tyrosinemia type 1 who presented symptoms of ADHD.

Results: scales and questionnaires were used to detect ADHD symptoms, the SNAP IV - Swanson, Nolan and Pelham Teacher and Parent Rating Scale was used with the mother, the items concerning inattention (items 1 to 10) and Hyperactivity-Impulsivity (items 11 to 20) were revealing; The Conners Evaluation Questionnaire was delivered, confirming the same result, a neuropsychological evaluation of the child with IQ evaluation by WISC-IV - Wechsler Intelligence Scale for Children and Adolescents revealed limited intellectual performance with an IQ of 65. Conclusions: NMDs, such as HT-1, constitute a large group of conditions that are often containable with early clinical intervention, but still present lifelong difficulties and high societal costs. many studies suggest that there may be similar biological mechanisms behind the cognitive difficulties seen in ADHD and HT-1. In

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clinical settings, the impaired dopamine synthesis due to substrate inhibition in treated HT-1 may be compensated for by standard ADHD medication, such as methylphenidate or amphetamine. Similarly, the reduced serotonin synthesis may be counteracted by tryptophan supplementation.

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EPP0797

Isoniazid-induced acute psychotic episode in a child with lymph nodes tuberculosis: case report and literature review

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Introduction: Tuberculosis (TB) is a bacterial infection caused by Mycobacterium tuberculosis and is a major public health problem in Morocco. The World Health Organization (WHO) recommends a four-drug combination therapy for two months (isoniazid (INH), rifampicin, pyrazinamide and ethambutol), followed by two drugs (INH and rifampicin) for 4 months, as first-line treatment for newly diagnosed pulmonary TB in children and adults. This regimen is generally considered effective, safe, and cost-effective. However, adverse effects and drug interactions often complicate the treatment of TB. Isoniazid is associated with 32% of adverse events, of which 1.9% are psychiatric.

Objectives: focus on drug-induced etiologies of acute psychotic symptoms make the diagnosis of isoniazid-induced psychosis report the literature on the management of this condition. focus on drug-induced etiologies of acute psychotic symptomsmake the diagnosis of isoniazid-induced psychosis report the literature on the management of this condition.

Methods: The patient and guardians were interviewed to obtain information after their consent. Data from the patient profile forms and laboratory test reports were evaluated. Causality assessment was done by the WHO scale and the Naranjo scale. Oral informed consent was obtained from the patient and parents.

Results: We report a case of acute psychosis in a child with a temporal sequence strongly in favor of INH-induced psychosis. Treatment with risperidone at an appropriate dose improved the symptomatology while waiting for the end of the antituberculosis protocol. As soon as the isoniazid was stopped, there was a clear return to the child's premorbid state.

Conclusions: The acute onset of psychotic symptoms in a patient taking isoniazid should lead to suspicion of this psychiatric side effect and prompt intervention, involving discontinuation of isoniazid and/or a trial of an antipsychotic.

As protective measures, the authors suggest adjusting the dose of isoniazid to weight, possibly performing a genetic test if slow acetylation is suspected, and closely monitoring patients with a favourable background.

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an antipsychotic. As protective measures, the authors suggest adjusting the dose of isoniazid to weight, possibly performing a genetic test if slow acetylation is suspected, and closely monitoring patients with a favourable background.

Disclosure of Interest: None Declared

EPP0798

Insular changes in autism spectrum disorder patients

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Introduction: Autism Spectrum Disorder is a chronic medical condition usually diagnosed during childhood. With psychosocial advancements in managing autistic children, the situation seems less debilitating compared to what it used to be in the past years. Adding neuroimaging advancements in the management can further improve the management of Autism Spectrum Disorder.

Objectives: Our objective is to investigate structural changes in the insular cortex through our review of the available literature in the area of interest.

Methods: Detailed literature search conducted using Pubmed, OVID, Google scholar with the search terms [insula] OR [autism] OR [brain changes] OR [autism spectrum disorder] OR [insular cortex] OR [insular changes] OR [neuroimaging] OR [neurology] OR [right insula] OR [left insula] OR [precentral cortex] OR [amygdala] Or [emotion] Or[memory] that produced around 300 results which were later narrowed down to be centered around search terms [autism] OR [insula] OR [structural changes] OR [brain]. 20 articles were made part of this review.

Results: Results revealed that there are significant changes that are seen in neuroimaging of patients with Autism Spectrum Disorder. Their anterior cortex undergoes changes more than the posterior cortex with changes being more pronounced on the right side. Neuroimaging can be used to follow up with the prognosis of a chronic condition. Insula is a multifunctional region of the brain that is responsible for connecting cognitive, emotional, and movement functions in the brain. It is a highly functional area responsible for important neural connections. Insula is a highly emotion-sensitive area responsible for pain perception and emotion regulation. Insular changes can also help to diagnose the chronicity of the condition and age of patients with Autism.

Conclusions: Cortical changes are visible on neuroimaging in several psychiatric conditions including schizophrenia, depression, anxiety, substance abuse, and alcoholism. Autism spectrum disorder is one of the diseases where neuroimaging can play an important role in planning further management. But unfortunately, this area is still under underresearched and needs to be given due importance to facilitate management of the chronic condition. Keywords: cortex, insula, neuroimaging, autism spectrum disorder

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